PTO/SB/22 (09-06)
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Under the Paperwork Reduction Act of 1995, no persons are	required to respond to a collection								
PETITION FOR EXTENSION OF TIME UND	Docket Number (Optional)								
FY 2006 (Fees pursuant to the Consolidated Appropriations	0905-0226P								
For IMAGE FILE APPARATUS AND METHOD									
Art Unit 2168	Examiner	H. Q. Pham							
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.									
The requested extension and fee are as follows	(check time period desi	red and enter the	appropriate fee below):						
	<u>Fee</u>	Small Entity F	<u>ee</u>						
X One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120.00						
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$						
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$						
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$						
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$						
Applicant claims small entity status. See X A check in the amount of the fee is enclosed.									
Payment by credit card. Form PTO-203	8 is attached.								
The Director has already been authorized to charge fees in this application to a Deposit Account.									
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 . I have enclosed a duplicate copy of this sheet.									
I am the applicant/inventor.									
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).									
attorney or agent of reco	CFR 1.34.	40,439							
	October 16, 2006								
Signature	Date								
D. Richard Anderson	(703) 205-8035								
Typed or printed name	I elep	phone Number							
NOTE: Signatures of all the inventors or assignees of record than one signature is required, see below.	of the entire interest or their repre	esentative(s) are required	d. Submit multiple forms if more						

10/17/2006 SDENBOB1 00000089 09490061

01 FC:1251

120.00 OP

Total of

forms are submitted.

PTO/SB/17 (07-06)
Approved for use through 01/31/2007. OMB 0651-0032
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Under the Paperwork Re	eduction Act of 1995,	no person are required to	respond to a collection	on of informat	ion unless it displays	a valid OMB c	ontrol number.		
Effective on 12/08/2004. The per pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL			Complete if Known						
			Application Number		09/490,061-Conf. #6688				
🛭 FEE TRANSMITTAL			Filing Date		January 24, 2000				
For FY 2005			First Named Inv		Yoshiki KAWAOKA				
F01 F1 2005			Examiner Name H. Q. Pham						
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 2168						
TOTAL AMOUNT OF PAYMENT (\$) 120.00			Attorney Docket No. 0905-0226P						
METHOD OF PAYMENT (check all that apply)									
X Check Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEAF		INATION FEES							
			ARCH FEES	EXAMI	NATION FEES				
Application Type	Fee (\$)	Small Entity Fee (\$) Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)		
Utility	300	150 500	250	200	100				
Design	200	100 100	50	130	65	· · · · · · · · · · · · · · · · · · ·			
Plant	200	100 300	150	160	80				
Reissue	300	150 500	250	600	300				
Provisional	200	100 0	0	0	0				
2. EXCESS CLAIM FEE	S						mall Entity		
							Fee (\$)		
Each claim over 20 (including Reissues)						50	25		
Each independent claim over 3 (including Reissues)						200	100		
Multiple dependent clair	ms					360	180		
Total Claims Ext	tra Claims Fe	ee (\$) Fee I	Paid (\$)		Multiple Dependent Claims				
20 - 20 =).00	<u>Fe</u>	<u>e (\$) </u>	ee Paid (\$)			
HP = highest number of total claims paid for, if greater than 20. Indep. Claims									
Indep. Claims Ext			0.00						
HP = highest number of inde									
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
100 = /50 (round up to a whole number) x =									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., lare (iling stircharge): 1251 Extension for response within first month 120.00									
SUBMITTER BY									
Signature			Registration No. (Attorney/Agent)	40,439	Telephone	(703) 205	-8035		

Date

October 16, 2006

Name (Print/Type) D. Richard Anderson